

**Walton County  
Parks & Recreation Department**

**Adaptive Sports Registration / Release Form**

Activity: Adapted Baseball Year: 2016 Season: SPRING

**Participant Information (print)**

Name: \_\_\_\_\_ / \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
(nickname) (a today)

Address: \_\_\_\_\_ City/County/Zip: \_\_\_\_\_

Physical / Medical Disability: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ YS YM YL AS AM AL AXL AXXL

☐ I understand that the uniform size which I order for my child will be the size he / she receive.  
If for any reason the uniform size is incorrect, I will be solely responsible for the replacement.

Mother: _____	Father: _____
Home #: _____	Home #: _____
Work #: _____	Work #: _____
Cell #: _____	Cell #: _____
E-Mail: _____	E-Mail: _____

☐ I understand that as the parent or guardian, I must stay at the field with my child at all times.  
Under no circumstances will I drop off my child and leave them without supervision.

**Medical Release**

I acknowledge that the Walton County Parks & Recreation Department does not carry insurance on participants in programs. Being aware of this and acknowledging that participation in any activity involves a certain degree of risk or injury, I hereby waiver, release, absolve, indemnify, and agree to hold harmless the Walton County Parks & Recreation Department, their board of directors, employees, coaches, instructors, officials, and volunteers from any and all liability arising out of any injury suffered by the above said participant during this activity. I understand that the above named parties will not assume responsibility for payment of medical treatment or transportation to or from the place of treatment. Only minor first-aid will be administered when necessary. I further agree to abide by the policies & procedures set forth by the Walton County Parks & Recreation Department.

**Photo Release**

Your child could be part of our promotional campaign!  
The Parks and Recreation Department may take and use photos of participants for publicity purposes. Photos of participants may be used in the City's Recreation Guide, website, local media and e-newsletter publications.  
I hereby grant the Walton County Parks & Recreation Department permission to use me, or my child's, likeness and/or name, in any broadcast, telecast or print media account of this activity free of charge.

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**Office Use Only**

Fee Paid: \$ \_\_\_\_\_ Cash: \_\_\_\_\_ Check #: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Staff: \_\_\_\_\_